

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

9-15652-205

CLAIMS AS FILED-- PART I

(Column 1)

(Column 2)

TOTAL CLAIMS	10	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	10 minus 20 =	*
INDEPENDENT CLAIMS	2 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	385

OR

RATE	FEE
BASIC FEE	770.00
XS18=	
X86=	
+290=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number 9-15652-2US		
CLAIMS AS FILED - PART I							
(Column 1)		(Column 2)			(Column 3)		
FOR	NUMBER FILED	NUMBER EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY		
BASIC FEE <small>(37 CFR 1.16(a))</small>			RATE	FEE	RATE	FEE	
TOTAL CLAIMS <small>(37 CFR 1.16(c))</small>	10	minus 20 = *	x \$ 0 =	0	x \$ ____ =		
INDEPENDENT CLAIMS <small>(37 CFR 1.16(b))</small>	2	minus 3 = *	x 0 =	0	x ____ =		
MULTIPLE DEPENDENT CLAIM PRESENT <small>(37 CFR 1.16(d))</small>			+ ____ =		+ ____ =		
			TOTAL	385	OR TOTAL	0	
* If the difference in column 1 is less than zero, enter "0" in column 2							
CLAIMS AS AMENDED - PART II							
(Column 1)		(Column 2)			(Column 3)		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
	Total <small>(37 CFR 1.16(c))</small>	*	Minus	**	=	x \$ ____ =	
	Independent <small>(37 CFR 1.16(b))</small>	*	Minus	***	=	x ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <small>(37 CFR 1.16(d))</small>			+ ____ =		+ ____ =	
				TOTAL	0	OR TOTAL	0
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
	Total <small>(37 CFR 1.16(c))</small>	*	Minus	**	=	x \$ ____ =	
	Independent <small>(37 CFR 1.16(b))</small>	*	Minus	***	=	x ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <small>(37 CFR 1.16(d))</small>			+ ____ =		+ ____ =	
				TOTAL	0	OR TOTAL	0
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
	Total <small>(37 CFR 1.16(c))</small>	*	Minus	**	=	x \$ ____ =	
	Independent <small>(37 CFR 1.16(b))</small>	*	Minus	***	=	x ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <small>(37 CFR 1.16(d))</small>			+ ____ =		+ ____ =	
				TOTAL	0	OR TOTAL	0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.